

HARRISON COUNTY PLAN COMMISSION  
IMPROVEMENT LOCATION PERMIT APPLICATION

PROPERTY OWNERS NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
and  
CURRENT ADDRESS \_\_\_\_\_ City, Zip \_\_\_\_\_

BUILDING CURRENTLY ON PROPERTY (circle one) Vacant/Single Family Dwelling/Modular/Mobile Home/  
Garage/Storage Building/Commercial (State Release # \_\_\_\_\_)

DIRECTIONS TO PROPERTY \_\_\_\_\_  
\_\_\_\_\_

Name of person living on property \_\_\_\_\_ Relationship to owner \_\_\_\_\_

FILL IN REST OF APPLICATION THAT PERTAINS TO THE REASON FOR PERMIT:

REASON FOR PERMIT \_\_\_\_\_ BUILDING SIZE \_\_\_\_\_

COST/APPRaised VALUE \_\_\_\_\_ NUMBER OF BEDROOMS \_\_\_\_\_

TYPE OF EXTERIOR \_\_\_\_\_ BASEMENT (circle) Yes/No Is it (circle): Finished/Unfinished

General Contractor \_\_\_\_\_ Electrician \_\_\_\_\_ Plumber \_\_\_\_\_  
Phone \_\_\_\_\_ Phone \_\_\_\_\_ Phone \_\_\_\_\_

PERMIT CHECKLIST- each item must be completed.(electric permits are exempt)

- \_\_\_\_ copy of current Health Department Permit (septic for new home or 90 day for existing homes) # \_\_\_\_\_
- \_\_\_\_ copy of recorded contract or deed (Can get from recorders office).
- \_\_\_\_ copy of driveway permit (not required for additions or existing State Hwy)
- \_\_\_\_ copy of site plan.(see reverse side; need setbacks for front, sides, rear of property & driveway location)
- \_\_\_\_ copy of building plans (foundation & tie down plan for manufactured & Mobile Home). Year of MH \_\_\_\_\_
- \_\_\_\_ copy of town permit if location is within Corydon City Limits. Town Hall Permit# \_\_\_\_\_

Has a variance or special exception ever been applied for or approved for this property \_\_yes\_\_no.

If yes please describe \_\_\_\_\_

I agree that, if granted a permit for the above described building at the location designated in the County of Harrison,  
I will observe and comply with all laws, ordinances, and regulations affecting the use of the land including the Zoning Ordinance and all  
Ordinances amendatory thereof and supplement thereof now in force in the County of Harrison and consent to inspection of the premises  
for which the permit is granted, during and upon completion of construction authorized. It is further agreed that upon a determination that  
the work performed under this permit does not comply with the approved site plan, I will take corrective action, including demolition if  
necessary, to insure the site improvements comply with all minimum setback requirements. If a Certificate of Occupancy is required the  
request must be made within 10 days after final inspection has been passed and before occupation of the dwelling.

\_\_\_\_\_  
SIGNATURE OF OWNER OR REPRESENTATIVE

\_\_\_\_\_  
Date

FOR OFFICE USE ONLY

Subject to all conditions stated above by the applicant and any conditions required by the Plan Commission staff,

Administrator/Planner \_\_\_\_\_ Date \_\_\_\_\_ Fee \_\_\_\_\_

Flood Plain Yes/No (Circle) Comments \_\_\_\_\_

Construction plans approved by \_\_\_\_\_ setbacks F \_\_\_\_\_ S \_\_\_\_\_ R \_\_\_\_\_

PARCEL ID TOWNSHIP \_\_\_\_\_ SECTION \_\_\_\_\_ TWP \_\_\_\_\_ RANGE \_\_\_\_\_ PARCEL \_\_\_\_\_

PIN\_18 31 - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ . \_\_\_\_\_ - \_\_\_\_\_

Project address \_\_\_\_\_

RECEIPT # \_\_\_\_\_ DATE \_\_\_\_\_ PERMIT# \_\_\_\_\_